



PUBLIC NOTICE

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WIRELINE COMPETITION BUREAU ADDRESSES FUNDING YEAR 2014 HEALTHCARE CONNECT FUND CONSORTIA ANNUAL REPORTS REQUIREMENTS

WC Docket No. 02-60

In this Public Notice, the Wireline Competition Bureau (Bureau) addresses the Funding Year (FY) 2014 Annual Report requirements for the Healthcare Connect Fund (HCF) and Rural Healthcare (RHC) Pilot Program consortia.¹ Consortia have already submitted all data needed for the FY 2014 Annual Reports through their program application forms² and will not be required to re-submit this data.³

In December 2012, the Commission adopted an Order establishing the HCF.⁴ In the *Healthcare Connect Fund Order*, the Commission set forth its HCF program goals and corresponding consortia Annual Report requirements.⁵ New HCF participants began submitting applications in January 2014 and in June of that year, recognizing the limited amount of data available for new HCF participants, the

¹ Funding Year 2014 began on July 1, 2014, and ended on June 30, 2015.

² See FCC Form 460, Eligibility and Registration Form, <http://www.usac.org/res/documents/rhc/pdf/forms/FCC-Form-460-Form-and-Instructions.pdf> (last visited Sept. 11, 2015); FCC Form 461, Healthcare Connect Fund Request for Services Form, <http://www.usac.org/res/documents/rhc/pdf/forms/FCC-Form-461-Form-and-Instructions.pdf> (last visited Sept. 11, 2015); FCC Form 462, Healthcare Connect Fund Funding Request Form, <http://www.usac.org/res/documents/rhc/pdf/forms/FCC-Form-462-Form-and-Instructions.pdf> (last visited Sept. 11, 2015); FCC Form 463, Healthcare Connect Fund Invoice and Request for Disbursement Form, <http://www.usac.org/res/documents/rhc/pdf/forms/FCC-Form-463-Form-and-Instructions.pdf> (last visited Sept. 11, 2015); FCC Form 465, Description of Services Requested & Certification Form, <http://www.usac.org/res/documents/rhc/pdf/forms/FCC-Form-465-Form-and-Instructions.pdf> (last visited Sept. 11, 2015); FCC Form 466, Funding Request and Certification Form, <http://www.usac.org/res/documents/rhc/pdf/forms/FCC-Form-466-Form-and-Instructions.pdf> (last visited Sept. 11, 2015); FCC Form 467, Connection Certification Form, <http://www.usac.org/res/documents/rhc/pdf/forms/FCC-Form-467-Form-and-Instructions.pdf> (last Sept. 11, 2015).

³ We dismiss as moot the Requests for Waiver filed by Kellogg and Sovereign and Colorado Telehealth Network (CTN) in which Kellogg and Sovereign and CTN sought: (1) waiver of the FY 2014 Annual Report requirements; (2) solicitation of public comment on the Annual Report format; and (3) reconsideration of the September 30 Annual Report deadline. See Kellogg and Sovereign Consulting, LLC Request for Waiver of Consortium Annual Report Requirement, WC Docket No. 02-60, at 3-4 (filed July 30, 2015) (Kellogg and Sovereign Request for Waiver); see also Colorado Telehealth Network (CTN) Request for Waiver of Consortium Annual Report Requirement, WC Docket No. 02-60, at 2-3 (filed Aug. 3, 2015) (CTN Request for Waiver).

⁴ *Rural Health Care Support Mechanism*, WC Docket No. 02-60, Report and Order, 27 FCC Rcd 16678 (2012) (*Healthcare Connect Fund Order*).

⁵ *Id.* at 16695-99, paras. 31-43, 16807-09, paras. 316-22; 47 C.F.R. § 54.647.

Bureau waived the requirements for the FY 2013 Annual Report for both HCF and Pilot consortia.⁶ The Bureau also issued a Public Notice seeking comment on how best to measure progress towards the HCF goals by optimizing the content and format of the Annual Reports.⁷

The Bureau seeks to minimize the administrative burdens placed on consortia to comply with the Annual Report requirements while at the same time ensuring it collects meaningful data with which it can evaluate the program. Accordingly, the Universal Service Administrative Company (USAC) will utilize online interfaces and data from program forms when possible to minimize any burdens associated with the Annual Report requirements,⁸ and has already collected the data needed for the FY 2014 Annual Reports through program forms from the HCF and Pilot Program consortia.⁹

Beginning next year, for the FY 2015 Annual Reports, in addition to the data and information provided through the program forms, in order to comply with the Annual Report requirements, HCF consortia will be required to identify through the “My Portal” online interface¹⁰ the types of telehealth applications supported by HCF.¹¹ For FY 2015 Annual Reports, Pilot Program consortia will also be

⁶ *Rural Health Care Support Mechanism*, WC Docket No. 02-60, Order, 29 FCC Rcd 7451, 7452, para. 4 (Wireline Comp. Bur. 2014).

⁷ *Wireline Competition Bureau Seeks Comment on Healthcare Connect Fund Annual Reports*, WC Docket No. 02-60, Public Notice, 29 FCC Rcd 7442 (Wireline Comp. Bur. 2014) (*June 2014 Public Notice*). Commenters raised some issues outside the scope of the Annual Reports proceeding, such as providing program support for different types of sites. *See, e.g.*, Comments of Geisinger Health System, WC Docket No. 02-60, at 3 (filed July 17, 2014) (Geisinger Comments). Because these issues do not bear on the Annual Report requirements, we do not address them herein. We note that while the *June 2014 Public Notice* included an Initial Regulatory Flexibility Analysis, the instant Public Notice does not require any analysis under the Regulatory Flexibility Act because the guidance provided herein does not constitute any new requirements not already contemplated in the *Healthcare Connect Fund Order*, which included a proper Final Regulatory Flexibility Analysis. *See Healthcare Connect Fund Order*, 27 FCC Rcd at 16847-63, Appendix C, Final Regulatory Flexibility Analysis.

⁸ *See Healthcare Connect Fund Order*, 27 FCC Rcd at 16809, para. 322 (explaining that the Commission sought to “simplify and streamline the [Annual Report] requirements as much as possible, in order to minimize the burden on participants while still ensuring the funding is used for its intended purpose”); *id.* at 16809, para. 320 (noting that “[s]ome of the [Annual Reports] data will already be collected through other forms that participants will submit through the funding process”). *See also* Comments of Kellogg and Sovereign Consulting, LLC, WC Docket No. 02-60, at 6-12 (filed Oct. 27, 2014) (noting that the majority of Annual Reports data required by the Commission in its *Healthcare Connect Fund Order* already is collected in FCC forms and accordingly requesting that USAC not redundantly request such data from consortia) (Kellogg and Sovereign Comments).

⁹ *See Healthcare Connect Fund Order*, 27 FCC Rcd at 16696-99, paras. 35-43, 16808-09, paras. 319, 321. *See also* supra note 2 and accompanying text.

¹⁰ *See Healthcare Connect Fund Order*, 27 FCC Rcd at 16807-08, para. 317 (agreeing with commenters that, “to the extent feasible, USAC should collect [Annual Reports] information through automated interfaces”); *June 2014 Public Notice*, 29 FCC Rcd at 7443 (proposing to collect the Annual Reports through USAC’s “My Portal” interface). Kellogg and Sovereign requests that USAC use “My Portal” both to capture new data points required of consortia and to provide already-collected forms data to generate Annual Reports. *See* Kellogg and Sovereign Comments at 12.

¹¹ *See Healthcare Connect Fund Order*, 27 FCC Rcd at 16807-09, paras. 317, 319, 321 (stating that the Commission will require HCF and Pilot Program consortia to submit Annual Reports with data on “whether and to what extent the supported connections are being used for telemedicine, exchange of [electronic health records] EHRs, participation in a health information exchange, remote training, and other telehealth applications.”). *See also* Geisinger Comments at 4 (suggesting that the Annual Reports include data on the types of telehealth applications used to “indicate[] the universe of patients that are being reached through telemedicine.”).

required to identify the types of telehealth applications supported by the RHC Program, as well as report on various aspects of their competitive bidding processes.¹²

Both the Bureau and USAC are committed to ensuring that the RHC programs operate both with the highest degree of transparency and least imposition of administrative burden on program participants.¹³ To that end, the Bureau and USAC have held several webinars¹⁴ and engaged in other outreach efforts¹⁵ to solicit participant feedback and provide details about information technology and program developments. Additionally, to further transparency of the RHC programs, USAC will make aggregate consortia Annual Report data publicly available as soon as possible.¹⁶

We note that several data collections not addressed above could enhance the Commission's assessment of the progress towards the HCF program goals. For example, in the *June 2014 Public Notice*, the Bureau proposed the following data collections: whether participants' obtained bandwidths met their needs; participants' anticipated increases in bandwidths or service-level upgrades and whether their service agreements allowed for such increases; potential growth of participants' networks; number of network outages and duration when service was unavailable; and the types of technologies consortia use to receive service (e.g., fiber, coaxial cable, copper, wireless, or satellite).¹⁷ Commenters suggested additional data collections, including participants' administrative costs, and cost savings resulting from

¹² See *Healthcare Connect Fund Order*, 27 FCC Rcd at 16808-09, para. 319 (requiring consortia to provide in their Annual Reports "the number and nature of all responsive bids received through the competitive bidding process as well as an explanation of how the winning bid was chosen."). We will not require Pilot Program consortia to provide in their FY 2015 Annual Reports and beyond any Pilot Program Quarterly Reports data that is not also an Annual Reports requirement, finding that such Quarterly Reports data is not necessary to effectively evaluate the Pilot Program or prevent waste, fraud, and abuse therein. See *id.* at 16809, para. 321 (delegating to the Bureau the authority to specify whether any additional Pilot Program Quarterly Reports information should continue to be included in Pilot Program Annual Reports); *Rural Health Care Support Mechanism*, WC Docket No. 02-60, Report and Order, 22 FCC Rcd 20360, 20423-24, 20432-34, paras. 126-27, Appendix D (2007) (setting forth the Pilot Program Quarterly Reports requirements).

¹³ See *supra* notes 8-10 and accompanying text.

¹⁴ See, e.g., FCC-USAC Webinar: [Healthcare Connect Fund] FY 2015 Kick-off: Program Updates, July 21, 2015, http://www.usac.org/_res/documents/RHC/training/2015/FCC-USAC-Webinar-FY2015-Kick-Off.pdf (last visited Sept. 11, 2015); FCC-USAC Webinar: Healthcare Connect Fund Program, Oct. 28, 2014, http://www.usac.org/_res/documents/RHC/training/2014/FCC-USAC-HCF-Program-Webinar.pdf (last visited Sept. 11, 2015).

¹⁵ See, e.g., American Telemedicine Association Annual Meeting, USAC Rural Health Care Program Healthcare Connect Fund Training, Partner Meeting, http://www.americantelemed.org/ata-2015/conference-overview/detailed-schedule/sunday-may-3#.Va_v3PIVhBc (FCC and USAC staff-conducted HCF training and stakeholder roundtable discussion) (last visited Sept. 11, 2015); Schools, Health, and Libraries Broadband (SHLB) Coalition Annual Conference, Improving the Healthcare Connect Fund Workshop, <http://shlb.org/calendar/view/2015-SHLB-Annual-Conference-/agenda/> (SHLB, FCC, and USAC staff discussions focused on HCF policy and administrative issues) (last visited Sept. 11, 2015).

¹⁶ See *Healthcare Connect Fund Order*, 27 FCC Rcd at 16808, para. 318. See also Kellogg and Sovereign Request for Waiver at 4 (requesting that consortia's aggregate Annual Report data be made publicly available); CTN Request for Waiver at 3 (requesting that consortia's aggregate Annual Report data be made publicly available).

¹⁷ See generally *June 2014 Public Notice*. Kellogg and Sovereign requests that the Commission not seek data on consortia's anticipated increases in bandwidth, and that the Commission seek network outage data – if at all – from service providers as opposed to consortia. See Kellogg and Sovereign Comments at 3, 6.

the competitive bidding process.¹⁸ Because HCF is relatively new and the Bureau is still exploring how best to structure additional metrics to measure progress towards the HCF goals, we decline to impose these collections at this time. As HCF progresses and the Bureau engages in additional outreach with relevant stakeholders and federal agencies, however, we may consider some of these and/or additional information collections in the future.¹⁹

For additional information concerning this Public Notice, please contact Elizabeth V. McCarthy at (202) 418-7400, in the Telecommunications Access Policy Division, Wireline Competition Bureau.

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¹⁸ See Geisinger Comments at 5. Kellogg and Sovereign suggests that USAC's Funding Commitment Letters include a determination regarding a participant's future ability to substitute sites and/or services, and that this data could then be provided by USAC in Annual Reports. See Kellogg and Sovereign Comments at 4-6.

¹⁹ In May 2015, Bureau and USAC staff met with staff from the U.S. Department of Health and Human Services' (HHS) Health Resources and Services Administration (HRSA) to discuss HRSA's Telehealth Network Grant Program's Performance Improvement Measurement System to inform the Bureau's and USAC's development of the HCF Annual Report requirements, measurements, processes, and interfaces. See Letter from Elizabeth V. McCarthy, Attorney-Advisor, Telecommunications Access Policy Division, Wireline Competition Bureau, FCC, to Marlene H. Dortch, Secretary, FCC, WC Docket No. 02-60 (filed June 11, 2015). The Bureau plans to coordinate in an ongoing fashion with other federal agencies and stakeholders and refine as appropriate future HCF Annual Report reporting requirements to: (1) ensure the meaningful and non-burdensome collection of broadband data; and (2) reflect changing healthcare trends. *Healthcare Connect Fund Order*, 27 FCC Rcd at 16697, para. 37, 16809, para. 320. In the *Healthcare Connect Fund Order*, the Commission declined to adopt participants' attainment of HHS' EHR "meaningful use" objectives as an HCF performance measure, but noted that it may incorporate this metric into HCF performance measures in the future. *Id.* at 16697, para. 37.